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AUTHOR	Atkyns, Robert L.; Hanneman, Gerhard J.
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ABSTRACT

Drug dealers are often popularly stereotyped as "pushers" who actively engage in enticing young people into the drug habit, but there have been no scientific studies of their behavior or their attitudes on drug abuse or public health. In an attempt to gain information about behavior characteristics and communication patterns of middle class dealers in Connecticut, questionnaires were distributed through user contacts, and 50 anonymous responses were received. Results indicated that dealers tend to be users of the drugs they sell and that their primary motivation is to obtain free drugs, although they also sell drugs as favors to friends. Friendship networks, in fact, are the principal sources for dealers and their customers for awareness of drugs and drug effects, drug abuse, and treatment methods and for initiating neophytes to experimentation. Studies of nonusers of drugs have shown that they, on the other hand, rely more on official drug program agencies and other professional sources for drug information. Implications for drug abuse information dissemination and treatment are discussed. (RN)

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INTERACTION PATTERNS AMONG DRUG DEALERS

by

Robert L. Atkyns
and Gerhard J. Hanneman

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DRUG ABUSE INFORMATION RESEARCH PROJECT

DAIR Report #5

OS 500 434

This report is one of a series of descriptive and predictive studies into the cognitive, affective and behavioral responses to drug abuse information. Project DAIR (Drug Abuse Information Research), proposes to define dimensions of information seeking and utilization that relate to drug abuse. Investigations in this series develop and implement the instrumentation for a methodology which includes surveys, experimental manipulations, field experiments and modeling. One goal of the series is the development of a stochastic behavioral model which allows the prediction of drug use behavior consequent to specified exposure from drug abuse information.

Computer time for statistical analyses was provided through the Facilities of the University of Connecticut Computer Center and supported by National Science Foundation Grant GJ-9 to the Computer Center.

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A complete list of available DAIR Reports is provided on the inside back cover.

Fifty middle class "dealers" of illicit drugs were studied via snowball sampling techniques to define behavior characteristics and communication patterns. Findings indicated that dealers tended to be users of the drugs they sell, likely to deal for friendship or free drugs, and also that dealers of opiates or psychedelics initiated a greater number of non users to drugs than marijuana dealers. Friendship networks were the primary link in creating awareness about drugs, their effects, abuse, and treatment in addition to initiating neophytes to experimentation. Information seeking behaviors among dealers, non-dealer users and non-users are compared. Implications for drug abuse information dissemination and treatment are discussed.

Accompanying recent legal trends reducing penalties for the private possession of substances such as marijuana, there has been a simultaneous move to increase punishment for the drug seller. The drug "dealer" (i.e., one who sells illicit drugs, narcotics and illegally obtained licit drugs) is often mythologized as the pusher; a shady figure in the schoolyard, hooking youth on his nefarious wares, while pocketing the profits.[1] Yet, among current research on the effects of illicit drugs and surveys about the extent of drug abuse, (e.g., Gergen, Gergen and Morse, 1972), there are no published systematic, empirical studies of drug dealers, their behavior, and their relationship to drug abuse trends and public health. In part, this may be due to the traditional qualitative approaches to drug usage exhibited by some sociologists, clinical psychologists, psychiatrists and others, and of course also to the relative inaccessibility of such a dealer population to social scientists.

The literature on dealer behavior typically focuses on the sale of a single drug item (e.g., heroin, marijuana) and is restricted to popularized

accounts, with the following exception. In a survey of 22 former and current heroin dealers under medical care for addiction in Great Britain, MacSweeney and Parr (1970: 424) rejected the "widespread belief that a clear distinction can be drawn between the drug pusher, who is not addicted, and the addict who does not push. . .(as) a false dichotomy. . .(Most) of the young non-therapeutic addicts. . .have at some time sold drugs." Nevertheless, the generalizability of the British findings to a black or Spanish speaking ghetto, or even to middle class communities may be challenged.

Some literature, however, does provide insights into ghetto dealer behavior; e.g., the descriptions of heroin sellers found in Malcolm X's autobiography (1965) and Woodley's (1971) journalistic portrayal of a Harlem cocaine dealer. These accounts depict the ghetto dealer as undertaking his high risk profession either to support his addiction or as one of the few options promising wealth and freedom from the ghetto.

In contrast, the white middle class individual is less likely to be an addict (National Commission on Marijuana and Drug Abuse, 1972) and apparently has more career opportunities. Does this suggest that he therefore exhibits dealing patterns that differ greatly from stereotypes or ghetto models? The available literature indicates this may be the case.

An article by an anonymous New York marijuana seller (Goode, 1969) suggests that dealers are motivated less by financial profit than by the status derived from supplying friends or by free personal consumption. This was supported by a study of cannabis dealers at Syracuse University (Kramer, 1971), claiming, without reference to an empirical methodology, that eighty percent of all drug users are at some time in the drug marketing network.

Other available evidence consists of anecdotal data about college-student dealers at Harvard and Berkeley provided in a quasi-novel entitled Dealing (Douglass, 1972). It suggests that marijuana dealers are simply participating in a lifestyle that views drug trafficing as an integral part of the social milieu, in which dealing becomes a challenge, a way to supply friends (thus providing recognition) and, of course, a profit-making venture. Fakir (1972) confirms this view in a report about a large-scale hashish dealer who states he started dealing the way most dealers start (he felt), by having such good contacts for acquiring drugs that his friends pressured him to supply them.

Theoretic approaches to the study of dealer behavior are apparently non-existent. It is suggested that the innovation diffusion paradigm may be a viable framework for the analysis of dealer behavior. Within this, dealers may be construed as change agents supplying innovations (drugs) to early adopters in a social system, but also adopting an additional innovation (dealing behavior) themselves. The innovation diffusion paradigm also provides a framework for studying the impact and effects of behavioral deviance, a trait frequently attributed to the drug dealer (e.g., Becker, 1963) as well as the innovation change agent (Rogers and Shoemaker, 1971). It suggests that confirming the adoption of an innovation (e.g., through dissonance reduction) is crucial to an innovation's success.

For instance, dissonance theory (Festinger, 1957) would predict that a newly confirmed user or dealer experiences conflict about adopting behavior not in accord with societal norms. The individual in such instances must justify his new behavior. That is, either he must find a way to channel his dissonance and reduce it, or the likelihood of disadoption would occur. Trans-

lated into dealer behavio., it is suggested that continued successful selling and consequent dealer integration into interpersonal drug networks provides considerable reinforcement and justification for the new behavior.

Justification for dealer activity may, of course, also occur in other ways. For example, the dealer may obtain social support for his new behavion by initiating others to drug use and accepting their recognition of him as a dealer, or their need of him in his new role, as reinforcing. Examining the extent to which these justification activities influence dealer behavior is one of the reasons for this study.

There is also the possibility that some underlying innovativeness continuum exists, with low level drug use (marijuana) on one end, and heroin use and dealer activity on the other end. Such a continuum may also express perceived risk as well as the innovativeness of the drug-related behavior. Consequently, the extent of justification necessary to confirm adoption would be expected to vary with a person's position on the continuum. Verification of such a multidimensional continuum might help explain and understand the dealer phenomenon.

This study thus proposes to (1) explore some preliminary notions about dealer behavior, and (2) to describe the general behavioral characteristics of a middle class dealer population.

METHOD

For the purposes of this study, drug dealers were operationalized as individuals who currently or formerly sold (in any quantity) the following substances: "ups"; "downs"; cannabis products; psychedelics; opiates and

others.[2] A dealer population present in the Storrs, Connecticut area during April, 1972 was identified via snowball sampling techniques. Such sampling procedures, typically used in diffusion studies to trace innovation adoption patterns (Rogers and Shoemaker, 1971), involved identifying present drug users (key informants) and asking them to present a sealed packet containing questionnaires to any dealers they had contact with. In certain cases, where dealers were identified to the researchers, they were asked to obtain the cooperation of other dealers. All forms were sealed in envelopes provided for the purpose, and distributed and collected by our initial contacts.

The following procedures were used to assure the accuracy of the data:

1. Check items were included in the instruments such that responses to certain items could be used to validate other responses;

2. Guarantees about the anonymity of the data plus descriptions of the research project were included in every envelope, and key informants were instructed to repeat such guarantees to the dealers;

3. Key informants were encouraged to spend considerable time assuring the dealer contact of the anonymity and nonpunitive nature of this research project. Key informants were also asked to be as persuasive as possible in obtaining dealer cooperation. Apparently, because of the friendship systems tapped, this procedure was reported to be especially effective;

4. The reputation of the DAIR project (Drug Abuse Information Research) at The University of Connecticut for integrity appeared to also be instrumental in gaining cooperation.

Sixty (60) envelopes were distributed. Ten dealers refused to cooperate on the basis that the project was "silly," "personally jeopardizing" or "detrimental" to all drug users. Within the final usable sample of 50 there were numerous refusals to answer specific items, for instance, those asking for normal sale units and demographics.

Based on the face validity of the data and information supplied by user and dealer contacts, the dealer sample obtained is probably more representative

of typical (nonopiate-oriented) white, middle class dealers who cater to high school students, college students, and young adults. Since heroin dealers and nonwhite dealers are under-represented, this sample cannot be considered representative of a national dealer population.

Two instruments were used in this study. One instrument was a five page form assessing past and present dealer activity and demographics and employing Likert-type items, open-ended questions, and semantic differential scales. Another instrument assessed media behavior, communication network integration and diffusion behavior utilizing open-ended and Likert-type items.[3]

The second instrument had previously been employed in a study of the dissemination of drug related information (Hanneman, 1972). However, an additional cover sheet was added which made reference to one of five drug categories: amphetamines; barbiturates; cannabis; psychedelics; opiates. Subjects were instructed to only use the particular drug category listed as a frame of reference. These data were then analyzed by category and collapsed into drug user and non user groups. Utilizing these data, some comparisons were possible of the information seeking behaviors of these groups and the dealers. However, because of the lack of interviewer control over respondents some of the data are presented in percentage form.

RESULTS

Sample Characteristics. The dealer was most typically a male (79.2%), from 20-25 years old (80.0%) who has had at least some college education (81.8%), own a car (61.7%), is unemployed (58.3%), and has had no previous military service (85.4%). Although the majority (63.3%) of the dealers in

the sample were now in college, drug experimentation began between 17 and 18 years old (46.7%) with cannabis (91.3%) while living with parents (93.6%) who were married to their original spouses (78.7%) and attending public, suburban high schools (41.7%). Dealers have been arrested for both drug (19.5%) and non-drug related (31.3%) offenses.

Theoretic Results. Table 1 indicates that the primary motivation for dealing illicit drugs was obtaining free drugs for personal use. In other words, half of the dealers in the sample considered part of their wholesale supply as profit from supplying others. These findings confirm reports in the popular literature.

TABLE 1 ABOUT HERE

Unexpectedly, most dealers reported selling more than one type of drug, in contrast to previously published reports, (e.g., Woodley, 1970; Goode, 1969). Since there was no interviewer to respond to this unexpected nonexclusivity of the responses in choosing drug categories, thorough analysis of this section of the data was precluded. However, Table 2 indicates the extent to which dealers also use the drugs they deal.

TABLE 2 ABOUT HERE

An an indication of the amount of justification (by indoctrinating others to drug use) needed to confirm dealer behavior, Table 3 lists an index of initiation for each drug category. Given the existence of the conjectured multidimensional drug riskiness continuum, one would expect a higher index of initiation to occur among the more risky drugs. The trend in Table 3 generally

TABLE 1

SELF-REPORTED MOTIVATIONS FOR SELLING DRUGS*

Obtain free drugs for personal use	50.0%
Favor to purchaser	14.6%
Obtain spending money	12.5%
Subsidize living expenses	12.5%
Pleasure and excitement	4.2%
Become wealthy	2.1%
Obtain peer group status	2.1%
Personal reasons	2.1%

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*Differences among categories analyzed by chi-square, ($\chi^2 = 69.335$, df = 7, $p < .001$).

TABLE 2

PROPORTION OF DEALERS SELLING AND USING BY DRUG CATEGORY

Drug Category	Dealers Using and Selling*
Cannabis	95.9%(48)
Amphetamines	97.3%(37)
Psychedelics	88.9%(36)
Barbituates	100.0%(12)
Opiates	100.0%(8)
Others (Cocaine, glue, etc.)	100.0%(13)

*Note categories are non-exclusive due to multiple sale groups. Percentages refer to number reporting sale and use out of the total reporting dealing within a drug category.

supports this notion. That is, respondents tneded to initiate non-users to drug use while they were dealer-users rather than prior to the adoption of the dealer role.

TABLE 3 ABOUT HERE

Drug Dealing. Cannabis was the first drug sold (75.5%) in units of an ounce or less (77.1%) followed by a second sale within a week (80.9%) at age 19 (21.3%). Although some subjects immediately considered themselves "dealers" (24.4%), a year's time was apparently necessary for a majority to accept this self-definition (57.8%) and it was never accepted by some (33.3%).

Dealers sell several categories of drugs during their career, although there is often a self imposed limitation to restrict sale within certain categories (55.3%). Most dealers sell combinations of cannabis (98%), psychedelics (74.4%) and ups (75.5%) while generally avoiding downs (24%) and opiates (18%).

While there has been some discontinuation of the dealing innovation, most subjects continue to sell drugs (67.3%). There has been a decrease in multi-category selling by dealers (66% to 18%) and an increase in those selling only cannabis (8.2 to 21%). Those that have discontinued sale cite arrest (25%), fear of arrest (25%) and personal reasons (18.75%) as motivating factors.

Drug Adoption and Information Acquisition. Subjects became initially aware of illicit drugs through friends (83.5%) and media features (12.2%); school drug programs and media advertisements played negligible roles. Discussion of drugs occurs between friends (73.5%), and infrequently among family members (14.3%). Friends (38%) and television advertisements (18%) created an

TABLE 3

INITIATION OF NONUSERS TO A SPECIFIC DRUG

Drug Categories	Percentage of Subjects Reporting Initiation Activity*		Index of Initiation**
Opiates			
User	16%	n=12	78%
Dealer-User	13%		
Psychedelics			
User	55%	n=31	77%
Dealer-User	43%		
Cannabis			
User	76%	n=45	68%
Dealer-User	51%		
Amphetamines			
User	43%	n=26	61%
Dealer-User	26%		
Barbituates			
User	39%	n=24	59%
Dealer-User	23%		
Other			
User	33%	n=20	54%
Dealer-User	18%		

*This figure indicates the percentage of subjects (from the total) who have initiated nonusers to drug use. The time period while a subject is a dealer-user is a subset of the period as a user. N's reflect those reporting use prior to becoming dealers.

**This index is the ratio of initiations of dealer-user to user expressing the extent to which the person, while a dealer and user of a drug, initiated others to its use as compared to the extent he initiated others to use of the same drug prior to becoming a dealer. Thus, the higher the index score, the greater the correspondence between the frequency of initiation activities before and after becoming a dealer.

awareness about the abuse of drugs, while information about their treatment and effects was sought from friends (51.1%) and telephone drug lines (12.8%).

Friends were also reported as being the most convenient (70.8%) and believable (64.6%) sources, and favored when a conflict in information existed between friends and the media, family members or government agencies. Personal investigation and experimentation was cited in all situations as a preferred secondary approach to informational conflict resolution.

TABLE 4 ABOUT HERE

Table 4 compares dealer perceptions of the convenience and believability of various information sources with non-dealer drug users and nonusers (data from Hanneman, 1972). A Chi-square analysis indicated that dealer and user groups are essentially similar in their perceptions, while the nonuser group stands alone ($p < .001$). Note that friends take on less importance for nonusers when convenient and believable information is considered, perhaps providing more indirect support for the notion of strong, friendship groups supportive of drug use and integration into which is essential for dealing and drug use.

TABLE 5 ABOUT HERE

When the dealer is compared to nondealers in regard to where he would seek information about drug treatment and effects he tends, much like the nondealer user, to rely primarily on friends and his own experience, in contrast to the heavy reliance on professional sources expressed by nonusers. Table 5 indicates the nonusers group differs significantly on information seeking dimensions from the dealer and nondealing drug user groups ($p < .001$).

TABLE 4

CONVENIENCE AND BELIEVABILITY OF INFORMATION SOURCES
FOR DEALERS (D), USERS (U) AND NON USERS (N)

Information Source	Convenience*			Believability*		
	D	U	N	D	U	N
None	4.2%(2)	3.2%(4)	6.1%(17)	6.3%(3)	1.6%(2)	6.3%(17)
Friends	70.8%(34)	83.2%(104)	49.1%(136)	64.6%(31)	59.1%(75)	25.0%(68)
Relatives, not parents	4.2%(2)	0.8%(1)	0.4%(1)	2.1%(1)	0.8%(1)	0.4%(1)
Parents	0.0%(0)	0.0%(0)	1.4%(4)	0.0%(0)	0.0%(0)	1.1%(3)
Government Agencies	0.0%(0)	0.0%(0)	4.3%(12)	0.0%(0)	2.4%(3)	12.9%(35)
Media Ads	2.1%(1)	2.4%(3)	20.6%(57)	2.1%(1)	3.1%(4)	9.2%(25)
Telephone Drug Lines	0.0%(0)	2.4%(3)	9.0%(25)	2.1%(1)	15.7%(20)	26.1%(71)
Other (e.g., pharmaceutical books; own experience)	18.8%(9)	8.0%(10)	9.0%(25)	22.9%(11)	17.3%(22)	19.1%(52)
	N=48**	N=125**	N=277**	N=48**	N=127	N=272**

*Differences between groups analyzed by Chi-square analysis (Convenience X^2=67.50, df=14, $p < .001$, Believability X^2=80.55, df=14, $p < .001$). Differences between dealer and user groups for both Convenience and Believability are nonsignificant.

**Does not include 2,2,1,2, and 6 missing cases, respectively.

TABLE 5

INFORMATION SOURCES SOUGHT ABOUT
DRUG TREATMENT OR EFFECTS

Information Source	Dealer*	Drug User*	Non User*
Friend	51%(24)	45%(58)	18%(50)
Telephone Drug Line	13%(6)	12%(15)	19%(51)
Private Doctor	4%(2)	8%(10)	18%(50)
Health Center	2%(1)	8%(10)	8%(23)
Drug Program	2%(1)	12%(15)	29%(78)
Government Agency	0%(0)	1%(1)	1%(3)
Media	4%(2)	3%(4)	3%(8)
Other (e.g., pharmeceutical books; own experience)	23%(11)	12%(15)	4%(11)
	N=47**	N=128	N=274**

*Differences among groups analyzed by Chi-square analysis (X^2=87.7795, df=14, $p < .001$). Differences between dealer and user groups are nonsignificant.

**Does not include 3 and 5 missing cases, respectively.

Subjects first tried drugs with a close friend (73.9%) whom they had known for more than a year (57.4%). Total disconfirmation of drug use was very rare (4%), as was participation in drug rehabilitation programs (12.2%). Cannabis was the most frequently used drug, primarily on a daily basis (62%).

Communication Behavior. Drug sellers depend on interpersonal contacts to arrange for both purchase (89.4%) and sale (93.2%). Telephones are used secondarily for purchase (48.9%) and sale (63.6%). Letters and special modes (e.g., telegrams, printed codes) are seldom employed for either purchase or sale.

While the study did not concentrate on media consumption exclusively, the data indicate that dealers are similar to others in the same age bracket in that 34% were unable to cite a regularly viewed television program while 84% were able to name a listened to radio station. The notion that dealers, as well as non-dealer users identify with a cultural phenomenon is supported by the most favored media choices of an FM "progressive" radio station (72%) and Rolling Stone magazine (26%). In choosing among more conventional sources, dealer respondents were typical (in comparison to other drug users) in selecting a college newspaper and the New York Times over other newspapers, and indicating a heavy preference for movies (44%) on television (cf. Hanneman, 1972).

DISCUSSION

From an examination of the data a behavior and interaction pattern among middle class dealers emerges. Dealers tend to be users of the drugs they sell, and the primary motivation for these sales is obtaining free drugs for personal

use--confirming similar notions found in the popular literature (e.g., Goode, 1969). Dealers are also more likely to initiate nonusers when they deal in those drugs considered "riskier" in terms of the potential for addiction, mental disturbance and criminal penalties. These findings should be tempered however, by the fact that the suburban rural dealer population studied dealt primarily in soft drugs and probably participate in a social milieu entirely different than their urban counterpart opiate dealers.

This study generally supports the notion that dealers' drug-related and communication behaviors are not dissimilar from demographically alike drug users who are not dealers. The reliance on friendship networks, the communication orientation, as well as perceptions of drug information is essentially similar for both groups. What should be noted is that the groups are different from the nonuser. Such a finding is also borne out by other data (Hanneman, 1972). The extent to which dealers, then, are a singularly psychologically deviant group, as Becker (1963) indicates is open to question and investigation.

Theoretically, the innovation diffusion paradigm seems a heuristic explanatory model of dealer behavior with some exceptions. Although dealers clearly act in the role of change agents to promote diffusion, formalized change agencies which support the innovation seems to be replaced by the drug culture, an informal ideology of drug use as pleasurable and acceptable activity. This appears to be so when friends replace the media as the major source of innovation awareness. Since friends also act as the local opinion leaders in obtaining adoptions, and as sources of information on drug use and abuse, dissimilarly perceived sources would tend to have little influence on drug communication networks, as they are equally ineffective in formalized change activity (Rogers and Shoemaker, 1971).

Subjects surveyed had typically adopted drug use prior to becoming dealers. Instances of the sale of a specifically nonadopted drug were rare, as most dealers sold only drugs they were still using. Although sale of drugs to friends was perceived by the dealer as a favor, financial considerations were cited as a primary motivation by over one-fourth of the subjects.

Thus, it seems experienced users, acting as change agents, promote the initiation of nonusers, typically while the agents are dealers. Opiate and psychedelic dealers tend to initiate a larger percentage of novices during their tenure as dealers than do sellers of other drugs. It is posited that the sale of these substances would entail greater perceived risk and thus encumber justification behavior manifested in the initiation of others to drug use.

Implications. Drug abuse information agencies (e.g., governmental agencies; schools) are themselves change agents; yet they differ from dealers and other information sources in that their goals are to contain the innovation and to halt its further adoption while simultaneously disseminating information about it. These data suggest that such agencies have had little or no influence on dealer-user populations. Perhaps a credibility gap is perceived by users and potential users as long as one governmental branch is concerned with drug enforcement and another with drug information dissemination, or until unproven arguments such as marijuana-heroin causality are put aside. As Woodley (1971:52) notes: "The potential (cocaine) drug user who seriously wishes to know the extent of the dangers, or who is willing to listen, quickly discovers that the information peddled doesn't check out. So he is likely to throw out the wheat with the chaff and believe nothing."

The adoption of a public health perspective by those agencies mandated to promulgate drug abuse information, suggests that material on matters accompanying

use might also be disseminated, preferably in a manner suited for highly educated or highly ego-involved audiences; for example, information about emergency treatment of a narcotics overdose or an LSD "freakout," or guides for the prevention and detection of hepatitis.

This information could then be made both available and convenient to users by employing communication channels that function as effective linkage systems between agencies and members of the drug culture, such as utilizing the "alternative" media. Additional information could be packaged in the form of articles or news documentaries and used by the media as features, public service information, or paid advertising. In fact, these data as well as others (Hanneman and McEwen, 1972) suggest that since much of the current media effort on behalf of drug abuse seems inappropriate, paid sp t advertising might optimize audience attendance.

It was also found that subjects did use telephone drug lines when seeking information about treatment and effects of drugs. The efficacy of these channels is apparent since the anonymous caller can receive information from a similarly perceived source that could be more knowledgable than the friendship contacts primarily utilized in such information seeking.

The sale of marijuana is generally considered to be any transaction involving more than two joints (cigarettes) or one dollar (National Commission on Marijuana and Drug Abuse, 1972). Yet the middle class dealers of marijuana and other drugs do not appear to fit the stereotype of profiteers or addicts, the image predominately evoked when considering dealers. Ultimately, the legal definition of dealing and sale comes into question in order to separate the individual who uses drugs and "sells" small quantities to his friends from the professional importers and bulk merchants.

In future studies, an examination of dealer networks (controlling for drug type, quantity and frequency of sale) and social contexts (campus, high school, ghetto, factory, military, suburban professionals, etc.) may prove valuable. Investigating the motivation for disadoption by former dealers and users could also be extremely fruitful in order that effective strategies to support discontinuation might be developed. What is called for however, is an objective examination of the non-ghetto dealer as a "folk hero": the implications and dimensions of such a role in obtaining popular support (perhaps among non-users too?) and resisting drug abuse efforts.

FOOTNOTES

[1]Although a recent campaign by Blue Cross-Blue Shield (TIME, May 22, 1972) apparently seeks to debunk this myth. The ads proclaim, "The pusher isn't always an evil old man. He could be the boy next door."

[2]The drug categories are defined as follows: Cannabis-marijuana, hashish; Psychedelics-LSD, mescaline, peyote; Opiates-opium, heroin, morphine; Ups-methedrine, dexedrine, "speed"; Downs-barbituates, tranquilizers, muscle relaxers; Others-cocaine, procaine, glue, freon, etc.

[3]Both instruments are available from the authors.

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